

**PRACTICE REQUIREMENT  
ARTICLE 3  
QUESTIONS AND ANSWERS**

1. Do other Boards of Nursing have a practice requirement?

The requirement of the Arizona Board is similar to requirements of other Boards of Nursing: Oregon (960 hours in 5 years), West Virginia PN (200 hours in 2 years), Maryland (1,000 hours in 5 years), Nebraska (500 hours in 5 years plus continuing education), and Mississippi and Pennsylvania (no specified hours).

2. Did the Board examine any research to support the proposed practice requirement?

The Board examined *Evaluating the Effectiveness of Continuing Education Mandates*, National Council of State Boards of Nursing, Jan. 03, a study that shows that nurses view active practice as the largest contributor to their current abilities. This study can be obtained from the National Council of State Boards of Nursing. For more information, you may access their website, [www.ncsbn.org](http://www.ncsbn.org) and visit the publications section.

3. What if a nurse does not meet the practice requirement?

Licensees and applicants that do not meet the requirement may apply for and receive a temporary license to complete a nurse refresher course or place their licenses on inactive status without a fee.

4. How will the Board enforce this standard?

The Board will require each applicant to verify that they have met the practice requirement on renewal and initial licensure applications. If the Board receives a complaint on the licensee and it is discovered that the applicant falsified the information, the licensee is subject to action on the license that may include a civil penalty, a decree of censure, probation, suspension, or revocation of the license.

5. What about new graduates that have not had any practice?

New graduates must be licensed within 2 years of graduation or they will be required to complete a refresher course upon passing NCLEX®. Because of the steep learning curve for new graduates as they enter practice, new graduates that do not practice at the level of their academic program within 2 years are considered by the Board to be in a vulnerable position. The Board has determined that an update of knowledge and skills is necessary after 2 years of non-practice for these individuals.

6. What is the practice requirement?

The Board requires licensees to practice in some manner for at least 960 hours every 5 years, either as an employee or volunteer, to renew or obtain licensure. This equates to 24 weeks of full-time practice every 5 years.

7. Why is the Board implementing a practice requirement at this time?

In the past, the Board required an applicant to complete a refresher course if the license was inactive for five or more years and the applicant did not show evidence of active practice in the application. The practice requirement extends the older rule to licensed nurses and provides for the specific amount of practice to ensure that all nurses are current in their practice.

8. What activities qualify as practice?

“Practice” is interpreted liberally. Any job or position that requires or recommends an RN or LPN license would meet the criteria as will any activity performed as an employee or volunteer that is within the legal scope of nursing practice. In addition to bedside nursing, such activities as teaching nursing, supervising care, consulting, clinical experience in a nursing program, serving as a volunteer with a nursing organization or volunteering in health screenings will also qualify as practice. In most instances, caring for family members would not qualify. Call Pamela Randolph at 602-889-5209 or Judy Bontrager at 602-889-5204 if there are questions related to care of family members.

9. What is in the legal scope of RN and LPN practice?

The legal scope of practice is detailed in statute ARS §32-1601(13) and (12) which are reprinted below.

"Professional nursing" (RN) includes the following:

- (a) Diagnosing and treating human responses to actual or potential health problems.
- (b) Assisting individuals and groups to maintain or attain optimal health by implementing a strategy of care to accomplish defined goals and evaluating responses to care and treatment.
- (c) Assessing the health status of individuals and groups.
- (d) Establishing a nursing diagnosis.
- (e) Establishing goals to meet identified health care needs.
- (f) Prescribing nursing interventions to implement a strategy of care.
- (g) Delegating nursing interventions to others who are qualified to do so.
- (h) Providing for the maintenance of safe and effective nursing care that is rendered directly or indirectly.
- (i) Evaluating responses to interventions.
- (j) Teaching nursing knowledge and skills.
- (k) Managing and supervising the practice of nursing.
- (l) Consulting and coordinating with other health care professionals in the management of health care.
- (m) Performing additional acts that require education and training as prescribed by the board and that are recognized by the nursing profession as proper to be performed by a professional nurse.

"Practical nursing" includes the following activities that are performed under the supervision of a physician or a registered nurse:

- (a) Contributing to the assessment of the health status of individuals and groups.
- (b) Participating in the development and modification of the strategy of care.
- (c) Implementing aspects of the strategy of care within the nurse's scope of practice.
- (d) Maintaining safe and effective nursing care that is rendered directly or indirectly.
- (e) Participating in the evaluation of responses to interventions.
- (f) Delegating nursing activities within the scope of practice of a practical nurse.
- (g) Performing additional acts that require education and training as prescribed by the Board and that are recognized by the nursing profession as proper to be performed by a practical nurse.